



**MONTGOMERY COUNTY
FIRE AND RESCUE SERVICE**

21-04

Policy and Procedure

Page 1 of 10

EMS Quality Management Plan

7/13/2018

Issued by: Fire Chief Scott E. Goldstein

Policy Number: 21-04

Authority: Montgomery County Code Section 21-3 (b) and
COMAR Title 30

Supersedes: This is a new Policy

Effective Date: August 1, 2018

SECTION 1. Purpose:

The purpose of the Montgomery County Fire and Rescue Service (MCFRS) Emergency Medical Services (EMS) Quality Management Plan is to establish a formal process that allows for EMS system performance evaluation, including the enhancement of the quality of patient care and customer service provided by MCFRS personnel. This plan meets the mandate of *The Code of Maryland Regulations (COMAR) Title 30, Subtitle 03, EMS Operational Programs, Chapter 4 Quality Assurance* by formally defining an "Emergency Medical Services Quality Management Plan" for MCFRS.

SECTION 2. Applicability:

This policy applies to all MCFRS and Montgomery County Government personnel who provide patient care as part of the MCFRS EMS Operational Program.

SECTION 3. Background:

This policy is created to meet state standards and laws.

SECTION 4. Definitions:

- a. **Assistant EMS Quality Assurance Officer:** Individual(s) designated by the MCFRS in concurrence with the EMS Medical Director to facilitate the implementation of the EMS Quality Management Plan in compliance with COMAR 30.03.04.08 as directed by the EMS Quality Assurance Officer.
- b. **Code of Maryland Regulations (COMAR):** The official compilation of all administrative regulations issued by agencies of the State of Maryland. COMAR Title 30 regulates emergency medical services and establishes the Maryland Institute for Emergency Medical Services Systems as the lead EMS agency in the state.
- c. **Conduct Review Group (CRG):** A subgroup of the Medical Review Committee that reviews QA Inquiries during the preliminary stages of an investigation for a



**MONTGOMERY COUNTY
FIRE AND RESCUE SERVICE**

21-04

Policy and Procedure

Page 2 of 10

EMS Quality Management Plan

7/13/2018

nexus to prohibited conduct and MCFRS policy violations.

- d. **EMS Quality Assurance (QA) Inquiry:** A formal process for reviewing the concerns of customers and other stakeholders regarding the EMS system and individual EMS provider performance.
- e. **EMS Operational Program:** An EMS program that is approved under COMAR Title 30.03.02.02.
- f. **EMS Quality Assurance Officer:** The individual designated by MCFRS in concurrence with the EMS Medical Director who is responsible to implement the EMS Quality Management Plan in compliance with COMAR 30.03.04.08.
- g. **EMS Quality Improvement Officer:** The individual designated by MCFRS in concurrence with the EMS Medical Director who is responsible for using data and information to focus on system wide process improvements that benefit patients.
- h. **EMS Medical Director:** The physician appointed by the MCFRS to provide medical oversight of pre-hospital emergency medical care and emergency medical dispatch in compliance with COMAR Title 30.03.03.03.
- i. **Health Insurance Portability and Accountability Act of 1996 (HIPAA):** The Federal law that requires data privacy and security provisions for safeguarding medical information.
- j. **Maryland Confidentiality of Medical Records Act:** Maryland law which governs the disclosure of confidential individual healthcare information.
- k. **Maryland Institute for Emergency Medical Services Systems (MIEMSS):** The state agency that oversees and coordinates all components of the statewide EMS system in accordance with Maryland statute and regulation.
- l. **Maryland Public Information Act:** Maryland law which grants a broad right of access to public records while protecting legitimate governmental interests and the privacy rights of individual citizens.
- m. **Medical Review Committee (MRC):** The Committee designated by MCFRS in concurrence with the EMS Medical Director that is responsible to implement the EMS Quality Management Plan in compliance with COMAR 30.03.04.03.
- n. **Prohibited Conduct:** Individual conduct during the provision of emergency medical care that is prohibited by COMAR 30.02.04.01.
- o. **Quality Assurance (QA):** An organized method of auditing and evaluating quality of care that is provided within an EMS system.
- p. **Quality Assurance Database:** A computer software application that is maintained to capture and analyze data and trends of EMS Quality Assurance Inquiries within the MCFRS EMS Operational Program.



**MONTGOMERY COUNTY
FIRE AND RESCUE SERVICE**

21-04

Policy and Procedure

Page 3 of 10

EMS Quality Management Plan

7/13/2018

- q. **Quality Improvement (QI):** A systematic, continuous, formal approach to the analysis of practice, performance, and efforts to achieve measurable improvement in performance.
- r. **5-Day Incident Report / 35-Day Incident Report:** A MIEMSS Patient Care Quality Assurance Incident Report used to track EMS Quality Assurance Inquiries. These forms are maintained by MIEMSS and are referenced in the Maryland Protocols.

SECTION 5. Policy:

- a. This EMS Quality Management Plan will be administered by the EMS Quality Assurance Officer. It is also the duty of the EMS Quality Assurance Officer to coordinate the activities of the Medical Review Committee (MRC) and the Conduct Review Group (CRG). The EMS Quality Assurance Officer will meet all qualifications for the "EMS Operational Program Quality Assurance Officer" as outlined in COMAR 30.03.04 *Quality Assurance*.
- b. The EMS Quality Assurance Officer shall have, as needed, one or more Assistant EMS Quality Assurance Officer(s) to support the requirements set forth in this plan. All Assistant EMS Quality Assurance Officers will report directly to the EMS Operational Quality Assurance Officer in matters that involve quality assurance and improvement. Assistant EMS Quality Assurance Officers may be appointed from the following entities:
 - 1. MCFRS Operations Personnel,
 - 2. Local Fire and Rescue Department (LFRD) personnel assigned to oversee EMS quality assurance activities within the specific LFRD, and
 - 3. Emergency Communications Center (ECC)/Emergency Medical Dispatch (EMD) Quality Assurance Officer.
- c. Assistant EMS Quality Assurance Officers must meet all qualifications for the "EMS Operational Program Quality Assurance Officer" as outlined in COMAR Title 30.03.04 *Quality Assurance*.
- d. MCFRS will establish and maintain a MRC to implement the EMS Quality Assurance Program.
- e. The MRC shall be composed of the minimum of the following individuals:
 - 1. EMS Quality Assurance Officer (Committee Chair)
 - 2. Assistant EMS Quality Assurance Officer
 - 3. EMS Medical Director
 - 4. MCFRS EMS Section Assistant Chief
 - 5. MCFRS EMS Section Battalion Chief



**MONTGOMERY COUNTY
FIRE AND RESCUE SERVICE**

21-04

Policy and Procedure

Page 4 of 10

EMS Quality Management Plan

7/13/2018

6. MCFRS EMS Quality Improvement Officer
 7. EMD/ECC Quality Assurance Officer
 8. Public Safety Training Academy EMS Training Program Representative(s)
 9. IAFF Bargaining Unit Advance Life Support Provider(s)/Peer(s) (by appointment of the IAFF Local 1664 President)
 10. IAFF Bargaining Unit Basic Life Support Provider(s)/Peer(s) (by appointment of the IAFF Local 1664 President)
 11. MCFRS Command Officer Provider(s)/Peer(s) (by appointment of the Fire Chief)
 12. MCVRA Bargaining Unit Advance Life Support Provider(s)/Peer(s) (by appointment of the MCVFRA President)
 13. MCVRA Bargaining Unit Basic Life Support Provider(s)/Peer(s) (by appointment of the MCVFRA President)
 14. MCVRA Bargaining Unit Command Officer Provider(s)/Peer(s) (by appointment of the MCVFRA President)
- f. All appointments to the MRC are subject to the endorsement of the EMS Medical Director.
- g. The term of service for all appointed MRC members will be three (3) years. All appointments to the Medical Review Committee are renewable. Appointments will be staggered, so that no more than two new members are appointed within a successive year, except to fill an unexpired term. Personnel who are members of the MRC by virtue of their staff assignments will have terms linked with their MCFRS staff assignments.
- h. The MRC will meet monthly, as needed, at a time and place to be determined by the EMS Quality Assurance Officer, or at the call of the EMS Quality Assurance Officer. Other personnel with business before the MRC may attend the meetings as invited guests, including the Assistant EMS Quality Assurance Officers and other subject matter experts.
- i. The MRC is established as a committee of MIEMSS, and therefore is entitled to the confidentiality and immunity provisions of the *Maryland Confidentiality of Medical Records Act*, the *Maryland Public Information Act* and *HIPAA*. This includes all proceedings, records and files of the Medical Review Committee.
- j. All members of the MRC and any invited guests to the MRC meetings must maintain the confidentiality of all information regarding individual providers, and as such will be required to sign a **Medical Review Committee Confidentiality Agreement**, (see "attachment b").
- k. The EMS Medical Director will meet all qualifications for "EMS Operational Program Medical Director" as outlined in *COMAR Title 30.03.03*.



**MONTGOMERY COUNTY
FIRE AND RESCUE SERVICE**

21-04

Policy and Procedure

Page 5 of 10

EMS Quality Management Plan

7/13/2018

- l. The CRG will act as a subgroup of the MRC with the specific responsibility of reviewing circumstances addressed under the COMAR definition of prohibited conduct and MCFRS policy and procedures. It will be incumbent on the CRG to comply with all required reporting by MIEMSS and MCFRS.
- m. The CRG will consist of the following members:
 - MCFRS EMS Section Assistant Chief
 - MCFRS EMS Section Battalion Chief
 - MCFRS EMS Quality Assurance Officer
 - MCFRS EMS Assistant EMS Quality Assurance Officer
 - MCFRS EMS Quality Improvement Officer
 - MCFRS EMS Medical Director

SECTION 6. Responsibility:

- a. All MCFRS and Montgomery County Government personnel who provide patient care as part of the MCFRS EMS Operational Program are responsible for following this policy.
- b. The Quality Improvement Officer:
 - 1. Shall develop, with the advice and consent of the EMS Medical Director and operations staff, any number of key performance indicators that measures the effectiveness and quality of EMS processes conducted by MCFRS.
 - 2. Shall measure and evaluate the key performance indicators on a rolling basis with periodic presentation to MCFRS Operations Chief and MCFRS MRC.
 - 3. The MCFRS Quality Improvement Officer and/or designee, with the advice and consent of the MCFRS Medical Director and MCFRS Operations Chief, will recommend and implement quality improvement interventions aimed at changing system wide performance with regards to these defined key performance indicators.
- c. The Quality Assurance Officer:
 - 1. Will maintain a database for the EMS QA Inquiry Process. The EMS QA database will be the repository of all pertinent information from each of the inquiries regardless of nature. The EMS Quality Assurance Officer shall review the data for trends and present this information to the Medical Review Committee.
- d. The Medical Review Committee will review this policy once a year.
- e. The Medical Director and/or designee will provide guidance, leadership, oversight and continuous quality improvement for all personnel.



**MONTGOMERY COUNTY
FIRE AND RESCUE SERVICE**

21-04

Policy and Procedure

Page 6 of 10

EMS Quality Management Plan

7/13/2018

SECTION 7. Procedure:

- a. Customers, stakeholders, and providers can initiate an EMS QA Inquiry by bringing their concern to any member of the MCFRS. When a MCFRS member receives a concern, they should obtain the complainant's contact information and forward it, without delay, to any of the following personnel (in order of preference): EMS Quality Assurance Officer, an Assistant EMS Quality Assurance Officer, the EMS Battalion Chief, the EMS Assistant Chief, or an EMS Duty Officer.
- b. When the EMS Quality Assurance Officer receives positive feedback, they will ensure the information is forwarded to the provider and their chain of command in a timely manner.
- c. All EMS QA Inquires must be documented in the EMS QA Inquiry Data Base including the subsequent investigation and resolution.
- d. Timely responses to customer EMS QA Inquiries are essential to any quality management program. Therefore, when the EMS Quality Assurance Officer receives the EMS QA Inquiry, they must contact the complainant as soon as possible to acknowledge contact and identify his/her concerns. If the inquiry was not initiated by a member of MCFRS or an internal stakeholder, an acknowledgement shall be sent to the initiator by the EMS Quality Assurance Officer. At a minimum, the following documents shall be collected as applicable for EMS QA inquiries.
 1. MCFRS Records Management System (i.e., FireApp and ePCR records).
 2. On-line medical direction recordings.
 3. CAD records.
 4. Applicable Maryland Medical Protocols.
 5. Applicable Maryland and Montgomery County laws and regulations.
 6. Hospital medical records and patient outcome.
 7. EMS Standard of Care.
 8. Appropriate training records.
 9. Other documents as appropriate.
- e. The EMS QA Inquiry will be determined to be "complex" (Level 1 or 2) or "simple" (Level 3) by the EMS Quality Assurance Officer. This determination will be made through a process of elimination. No EMS QA Inquiry can be deemed "simple" if it involves any of the following:
 1. Prohibited conduct as defined by COMAR 30.02.04.



**MONTGOMERY COUNTY
FIRE AND RESCUE SERVICE**

21-04

Policy and Procedure

Page 7 of 10

EMS Quality Management Plan

7/13/2018

2. A potential danger to the public.
 3. Circumstances that caused significant worsening of patient's condition or death.
 4. A serious MIEMSS EMS Protocol violation.
 5. Recurrent (3 or more) Level 3 EMS QA Inquiries involving the same provider.
- d. If an EMS QA Inquiry is determined to be "complex" the EMS Battalion Chief will be consulted to further determine whether the EMS QA Inquiry is Level 1 or Level 2. Level determination will be assigned as follows:
1. A Level 1 EMS QA Inquiry will include those circumstances that result in a significant worsening of the patient's condition (or death).
 2. A Level 1 EMS QA Inquiry will include any occasion that a provider is deemed a danger to the public.
 3. A Level 2 EMS QA Inquiry will include any protocol violations and other complex issues that do not meet criteria for Level 1.
- e. EMS QA Inquiry levels are as follows:
1. Level 1 EMS QA Inquiry: After consultation with the EMS Battalion Chief, the EMS Quality Assurance Officer will conduct the fact-finding process. The complete Level 1 process may include any of the following:
 - A. A recommendation to the Medical Director as to the necessity for immediate temporary modification of the provider's credentials.
 - B. Notification to the provider's chain of command.
 - C. Acknowledgment of the complainant and/or customer in writing as appropriate.
 - D. Obtain outcome data for the patient.
 - E. Collection of written statements (signed & dated) (emails will suffice).
 - F. Gather supporting documents.
 - G. Notification of the EMS Medical Director.
 - H. Completion of the MIEMSS 5-day Form.
 - I. Notification of the Maryland State EMS Medical Director.
 2. Level 2 EMS QA Inquiry: After consultation with the EMS Battalion Chief, the EMS Quality Assurance Officer will conduct fact finding. The complete Level 2 fact finding process may include the following:



**MONTGOMERY COUNTY
FIRE AND RESCUE SERVICE**

21-04

Policy and Procedure

Page 8 of 10

EMS Quality Management Plan

7/13/2018

- A. Consideration of temporary modification of the provider's credentials pending further clarification and resolution.
- B. Notification to the provider's chain of command.
- C. Acknowledgment of the complainant and/or customer in writing as appropriate.
- D. Obtain outcome data for the patient.
- E. Collection of written statements (signed & dated) (emails will suffice).
- F. Gather supporting documents.
- G. Notification of the EMS Medical Director.
- H. Completion of the MIEMSS 5-day Form.
- I. Notify Maryland State EMS Medical Director.

3. Level 3 EMS QA Inquiry: The EMS Quality Assurance Officer or Assistant EMS Quality Assurance Officer will interview those providers involved as well as any witnesses. Once the facts are discovered and a finding is determined, timely remediation or corrective action should take place. The EMS QA Inquiry Data Base shall be completed and forwarded to the EMS Quality Assurance Officer with a recommendation to close the EMS QA Inquiry.

h. Modification of Credentials: If at any time during an Inquiry, the EMS Quality Assurance Officer and Medical Director discover enough evidence to suggest that the provider(s) might be a potential danger to public health, the MCFRS, or themselves, the Medical Director may temporarily modify the provider's emergency medical credentials in Montgomery County. When this occurs, the provider, his or her chain of command (including the Division Chief), MIEMSS, and the State EMS Medical Director must be immediately notified.

1. An EMS provider involved in an EMS QA Inquiry must be given an opportunity to be heard, in person if possible. A written statement by the provider describing the facts and any mitigating circumstances will be accepted by the EMS Quality Assurance Officer and presented to the MRC to meet this requirement.
2. The CRG is responsible for an initial parallel investigation that will take place for issues that fall under prohibited conduct as defined in COMAR Title 30.02.04 and Code of Conduct issues under Executive Regulation 22-00AM Code of Ethics and On-Duty Personal Conduct.
3. The EMS QA Inquiry of a Code of Conduct violation will focus on the medical implications of the provider's behavior. The CRG will also notify the provider's chain of command to handle disciplinary investigations separately when Code of Conduct



**MONTGOMERY COUNTY
FIRE AND RESCUE SERVICE**

21-04

Policy and Procedure

Page 9 of 10

EMS Quality Management Plan

7/13/2018

violations are alleged.

i. Recommendations for Resolution

1. The outcome of the root cause analysis will lead the EMS Quality Assurance Officer to develop preliminary recommendations for resolution which will be presented to the MRC.

j. MRC Action

1. The MRC will review the root cause and determine the appropriate actions for case resolution of all Level 1 and 2 EMS QA Inquiries.
2. A summary of Level 3 EMS QA Inquiries will be presented to the MRC. The MRC may require further discussion of Level 3 EMS QA Inquiries at the discretion of the MRC membership.
3. If it has been determined that a provider has failed to act in accordance with applicable law or protocols, or that prehospital patient care was below the applicable standard of care, or that the provider engaged in prohibited conduct as outlined in *COMAR 30.02.04*, the MRC shall determine remedial actions for the provider with the full authority and direction of the MCFRS EMS Medical Director.
4. Remedial actions may include but are not limited to: additional training, counseling, probation, or term (or indefinite) suspension.
5. The MRC will review all EMS QA Inquiries to identify system trends and lessons learned. The MRC shall recommend system improvements to the MCFRS leadership.
6. If a member of the MRC is the initiating complainant, that individual shall be recused from participating in the deliberations of the MRC for that inquiry.
7. The EMS Medical Director shall have final authority to approve or deny any decision by the MRC.

k. Closure

1. The EMS Quality Assurance Officer will coordinate the implementation of the recommended resolutions for the EMS QA Inquiry.
2. The EMS Quality Assurance Officer will complete all required documentation of the EMS QA Inquiry. If the Level 3 EMS QA Inquiry was completed by an Assistant EMS Quality Assurance Officer, then he/she must complete the EMS QA Inquiry Data Base with the recommendation to close the EMS QA Inquiry and forward it to the EMS QA Officer. Closure of the EMS QA Inquiry will then be at the discretion of the EMS Quality Assurance Officer.



**MONTGOMERY COUNTY
FIRE AND RESCUE SERVICE**

21-04

Policy and Procedure

Page 10 of 10

EMS Quality Management Plan

7/13/2018

3. The EMS Quality Assurance Officer will contact the complainant to advise them that the EMS QA Inquiry has been completed and that actions have been taken to improve the MCFRS EMS System. If the complainant is outside of the MCFRS or its stakeholders, this notification will be made in writing.
4. The EMS Quality Assurance Officer will give the provider and the provider's chain of command a memorandum stating that the EMS QA Inquiry has been completed. The memorandum will state whether the allegations were Sustained, Not-Sustained, Unfounded, or Exonerated. In addition, it will document the remediation required.
5. If a MIEMSS 5-day Incident Report was forwarded to MIEMSS during the initial fact finding, the EMS Quality Assurance Officer will complete a MIEMSS 35-day Form and forward it to MIEMSS with the findings and final recommendation.
6. The EMS QA Inquiry Data Base, with attachments, will be the document of record for all inquiries regardless of nature. Once completed, this record will be archived at the EMS Quality Assurance Office for at least 5 years.

SECTION 8. Cancellation:

This is a new policy.

SECTION 9. Attachments:

- a. EMS Quality Assurance Inquiry Process Flow Chart
- b. Medical Review Committee Confidentiality Agreement

Approved:

Handwritten signature of Scott Goldstein in black ink.

July 13, 2018

Fire Chief Scott E. Goldstein

Date